Recommended Clinical Management Of Elevated Blood Lead Levels in Young Children

Maine Childhood Lead Poisoning Prevention Program

All elevated capillary blood lead test results should be confirmed as soon as possible with a venous specimen.

Refer to the chart below for follow-up on all elevated venous blood lead test results.

| Venous blood lead level | Follow-up venous blood lead test schedule | Additional laboratory tests | Suggested long-term follow-up (after first 2-4 tests) | Childhood Lead Program Interventions |
|-------------------------------|--|------------------------------------|---|--|
| <10 μg/dl | Consider re-test if blood lead level is close to 10 µg/dl | None | None | None |
| 10-14 μg/dl | 3 months | None | 6-9 months | Educational materials mailed to family |
| 15-19 μg/dl | 2 months | None | 3-6 months | Referral for Public Health Nurse home visit Referral for home lead inspection |
| 20-44 μg/dl | 1 month | CBC ZPP | 1-3 months | Referral for Public Health Nurse home visit Referral for home lead inspection |
| 45+ μg/dl | Repeat venous blood lead test immediately Chelation therapy is indicated | CBC ZPP G6PD Iron studies | Based on chelation protocol | Referral for Public Health Nurse home visit Referral for home lead inspection Assistance in locating alternative lead-safe housing |

Note: This is a suggested basic course of management, not a mandated protocol. It is recommended that treatment guidelines be used in conjunction with consultation with physicians experienced in treating childhood lead poisoning, especially if chelation therapy is indicated. For more information, contact:



Maine Childhood Lead Poisoning Prevention Program (207) 287-4311 or 1 (866) 292-3474

http://www.maine.gov/dhhs/eohp/lead/